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State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: 2025 Partnership (LP, LLP, LLLP)

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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2. Exact Name of the Partnership					
Providence Inn Associates					
Brief description of the character of business conducted in Rhode Island					
Invests in a partnership that owns an interest in a hotel in Rhode Island					
City			State	Zip	
150 BLOOMINGDALE ROAD, UNIT 601		WHITE PLAINS	NY	10605	
7. The name and business address of each general partner or one or more partner(s): LP and LLLP only: an amendment is required to record a change in general partner(s) - use Form 301 (domestic) or Form 351 (foreign).					
PARTNER BUSINESS					
Estate of Arthur Robbins 150 Bloom		mingdale Rd, Apt 601, White Plains, NY 10605			
clare and affirm t	hat I have exam	ined this report, and that all	statements conta	ined herein are true	
Name of General Partner or Authorized Representative			Date		
Judith Robbins			8/1/2025		
Signature of General Partner or Authorized Representative					
951					
	Providence 4. Brief descrip Invests in a OAD, UNIT 6 ress of each gene is required to reconstruction clare and affirm to	Providence Inn Associate Brief description of the characteristic Invests in a partnership to the characteristic Invests in a partner or or is required to record a change in general BUSINESS AD 150 Blooming and affirm that I have examinated the characteristic Invests in a partner or or is required to record a change in general BUSINESS AD 150 Blooming and affirm that I have examinated and affirm that I have examinated the characteristic Investigation of the characteristic Invests in a partner or or is required to record a change in general partner or or in general partner or or in gen	A. Brief description of the character of business conducted Invests in a partnership that owns an interest in OAD, UNIT 601 City WHITE PLAINS ress of each general partner or one or more partner(s): is required to record a change in general partner(s) - use Form 301 BUSINESS ADDRESS 150 Bloomingdale Rd, Apt 601, V clare and affirm that I have examined this report, and that all uthorized Representative	Providence Inn Associates 4. Brief description of the character of business conducted in Rhode Island Invests in a partnership that owns an interest in a hotel in Rh City State NY Tess of each general partner or one or more partner(s): Is required to record a change in general partner(s) - use Form 301 (domestic) or Form BUSINESS ADDRESS 150 Bloomingdale Rd, Apt 601, White Plains, N clare and affirm that I have examined this report, and that all statements contauthorized Representative Date 8/1/2025	

MAIL TO:

Division of Business Services

148 W. River Street, Providence. Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

August 07, 2025 10:32 AM

Gregg M. Amore Secretary of State

Treg M. Coure

